

E- Cigarettes

"Potential health impacts - Evidence Based Medicine Review 2020"



Gurpreet Bambra M.D.

Objectives

- Evidence based analysis of health impact of electronic cigarettes.
- E-cigarette or Vaping Product Use Associated Lung Injury (EVALI)

Who Smokes ? US Data

- Each day, more than 3,200 people under 18 smoke their first cigarette, and approximately 2,100 youth and young adults become daily smokers.
- 9 out of 10 smokers start before the age of 18, and 98% start smoking by age 26.
- 1 in 5 adults and teenagers smoke.
- In 2011, an estimated 19% of U.S. adults were cigarette smokers.
- Approximately 18% of high school students smoke cigarettes.

- An estimated 42.1 million people, or 18.1% of adults in the United States smoke cigarettes.¹
- Cigarette smoking is more common among men (20.5%) than women (15.8%).¹
- Cigarette smoking is the leading cause of preventable death in the United States, accounting for more than 480,000 deaths, or one of every five deaths, each year.²
- More than 16 million Americans suffer from a disease caused by smoking.²
- Overall smoking prevalence declined from 2005 (20.9%) to 2012 (18.1%).¹





Smoking in Restaurants



*Includes cancers of the mosts, originaryss, ecophages, standards and liver and other candinosascular diseases Searces. Centers for Disease Centrel and Proceeding. Campaign for Tolecolo Free Xots, World Health Organization TME Caughts by Lan Neuroim, means by Sale Centery

Lung cancer incidence and trends, and smoking behavior among men : 2008



Electronic Cigarettes.....



How many

- E-cigarettes are more safe ?
- E-cigarettes are less addictive/ have less nicotine?
- E-cigarettes are substitute for Nicotine replacement therapy
- Have used E-cigarettes ?
- Have prescribed E-cigarettes for smoking cessation ?
- Will consider to prescribe E-cigarettes in near future ?

E-cigarettes a brief history

- Battery operated Nicotine delivery devices mimicking tobacco cigarette
- ► Introduced in 2003
- Portrayed in media as cessation aid
- Not approved by FDA
- But still advertised as "safer alternative "
- TAR level is low , but they have been found to contain cytotoxic heavy metals
- Unregulated contents
- Long term effects are not known.





Number of vapers globally

Adult smoking population of vapour products (millions)



Mis(Advertisement) in past.....

Test, test and test, until we get the offer right...



Doctors in every branch of modicine were asked, "What eligerate do you smoke?" The brand named most was Cameli The same development of the same meaning as a same develop same develop. Constitutions are noted, could militations, pack of our pack, and a finite or same shall be use other or granging. Make the same data is an other well Console plane your name, here well they well plane your name, here well they well plane down as yourse samely another. New W is here exploy drive a classroom cons her?

THE DOCTORS' CHOICE IS AMERICA'S CHOICE!



he Niderendae ber well Gande oar neet, blor well deg wil nie er ner wend weld. Nie 'N angestele e stjasmer om be? AMERICA'S CHOICE!



For 30 days, test Camels in your T-Zone" (Throat, Thoraste).

A/B split copy and format testing will find which's best



MORE DOCTORS SMOKE CAMELS THAN ANY OTHER CIGARETTE

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CAMELS Costlier Tobaccos

Your "I-Zone" Will Tell You ...

Testimonials and authority-figure endorsements always work well.

...and the trend still continues.



E-Cigarette Awareness and Perceived Harmfulness

Prevalence and Associations with Smoking-Cessation Outcomes

Andy S.L. Tan, MBBS, MPH, MBA, PhD, Cabral A. Bigman, PhD

	Awareness of e-cigarettes $(n=3,487)^a$		Believe e-cigarettes are less harmful (n=2,609) ^b		
Predictor variables	% (95% CI)	AOR (95% CI) ^c	% (95% CI)	AOR (95% CI) ^c	
Overall	77.1 (74.5, 79.7)	_	50.7 (47.8, 53.7)	_	
Age (years)					
18-34 (ref)	81.5 (74.7, 88.3)	1.00	60.1 (53.4, 66.8)	1.00	
35-49	83.5 (80.3, 86.7)	1.00 (0.56, 1.79)	51.2 (45.5, 56.9)	0.62 [*] (0.41, 0.94)	
50-64	78.6 (74.4, 82.8)	0.73 (0.41, 1.29)	47.3 (43.4, 51.1)	0.55** (0.38, 0.81)	
65-74	67.8 (61.9, 73.7)	0.38** (0.21, 0.69)	42.5 (36.0, 49.0)	0.48** (0.30, 0.79)	
≥75	46.6 (40.1, 53.2)	0.18 ^{***} (0.10, 0.31)	27.5 (19.7, 35.3)	0.28*** (0.16, 0.47)	
Gender					
Male (ref)	79.6 (76.0, 83.2)	1.00	58.4 (53.4, 63.4)	1.00	
Female	75.6 (72.3, 78.8)	0.82 (0.65, 1.02)	42.9 (39.2, 46.5)	0.84 (0.50, 1.40)	
Race/ethnicity					
White (ref)	81.3 (78.7, 84.0)	1.00	53.8 (50.1, 57.5)	1.00	
African American	78.1 (73.1, 83.0)	0.82 (0.52, 1.29)	42.2 (32.0, 52.4)	0.61 (0.35, 1.07)	
Hispanic	64.3 (54.9, 73.8)	0.38*** (0.24, 0.62)	53.5 (44.1, 63.0)	0.95 (0.64, 1.41)	
Other	72.3 (53.2, 91.4)	0.60 (0.21, 1.73)	42.9 (30.8, 54.9)	0.57 (0.31, 1.08)	
Education					
High school or below (ref)	65.0 (56.7, 73.2)	1.00	41.0 (28.2, 53.9)	1.00	
Completed high school	72.8 (67.3, 78.3)	1.15 (0.69, 1.93)	45.9 (37.8, 54.0)	1.23 (0.65, 2.34)	
Some college	80.3 (75.9, 84.8)	1.54 (0.90, 2.62)	51.4 (46.5, 56.3)	1.42 (0.77, 2.65)	
College graduate or higher	81.8 (79.3, 84.2)	1.75* (1.07, 2.87)	57.1 (52.2, 62.0)	2.06* (1.06, 4.02)	

Target them young Hit them hard!!





Source: National Youth Tobacco Survey, 2019

NATIONAL YOUTH TOBACCO SURVEY*: YOUTH USE OF E-CIGARETTES CONTINUES TO CLIMB



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Among Illinois high school seniors, past 30 day e-cigarette use is significantly rising while cigarette smoking is declining.



E-cigarette use by high school seniors is higher than cigarette use was 10 years ago!

EDUCATION ON E-CIGARETTE USE IS NEEDED

Using e-cigarettes, like cigarette use, puts youth at **risk for addiction** and other health consequences^{*}



CDC Reasons for Electronic Cigarette Use Among Middle and High School Students — National Youth Tobacco Survey, United States, 2016 Weekly / February 16, 2018

Participants were asked

"What are the reasons why you have used electronic cigarettes or e-cigarettes?"

- Friend or family member (39%)
- Availability of "flavors such as mint, candy, fruit, or chocolate (31%)

- The belief that "they are less harmful than other forms of tobacco such as cigarettes" (17%).

- Are easier to get than other tobacco products, such as cigarettes (5%)
- They cost less than other tobacco products such as cigarettes" (3%)
- famous people on TV or in movies use them (2%).



All Adults who report using / having used electronic cigarettes (2014) figures in %

How vapers use electronic cigarettes:



Current Tobacco Product Use among U.S. High School Students, 2011 to 2019.











What is this ?



Electronic cigarettes for smoking cessation: a randomised controlled trial

Christopher Bullen, Colin Howe, Murray Laugesen, Hayden McRobbie, Varsha Parag, Jonathan Williman, Natalie Walker







Electronic cigarettes for smoking cessation: a randomised controlled trial

Christopher Bullen, Colin Howe, Murray Laugesen, Hayden McRobbie, Varsha Parag, Jonathan Williman, Natalie Walker

	Nicotine e-cigarettes (n=289)	Patches (n=295)	Placebo e-cigarettes (n=73)
Age (years)	43.6 (12.7)	40.4 (13.0)	43·2 (12·4)
Women	178 (62%)	182 (62%)	45 (62%)
Ethnicity*			
New Zealand Māori	95 (33%)	95 (32%)	23 (32%)
Non-Māori	194 (67%)	200 (68%)	50 (68%)
Education below year 12† or no qualification	150 (52%)	123 (42%)	38 (52%)
Average number of cigarettes (including RYO) smoked per day	18-4 (7-2)	17.6 (6.0)	17.7 (5.6)
Age started smoking (years)	15.6 (4.7)	15·2 (3·8)	15.7 (5.1)
Number of years smoking continuously	25.9 (13.1)	23.5 (12.9)	24.8 (13.7)
Type of tobacco usually smoked			
Factory made only	167 (58%)	167 (57%)	47 (64%)
RYO only	92 (32%)	92 (31%)	21 (29%)
Both	30 (10%)	35 (12%)	5 (7%)
Lives with other smokers	151 (52%)	149 (51%)	42 (58%)
At least 1 quit attempt in past 12 months	158 (55%)	169 (57%)	39 (53%)
FTND score	5.6 (2.0)	5.5 (2.0)	5.5 (2.0)
FTND >5 (high dependence)	157 (54%)	162 (55%)	40 (55%)
GN-SBQ score	20.1 (7.9)	20.1 (8.4)	21.4 (8.6)
Self-efficacy to quit‡	3.7 (1.0)	3.7 (0.9)	3.6 (1.0)
AUTOS total score	22.6 (7.2)	23.1 (7.6)	23.4 (7.3)

Data are mean (SD) or n (%). RYO=roll your own (loose tobacco) cigarettes. FTND=Fagerström test of nicotine dependence. GN-SBQ: Glover-Nilsson smoking behavioural questionnaire. AUTOS=autonomy over smoking scale; higher scores indicate greater dependence. *All non-Māori ethnicity categories aggregated as non-Māori.³⁵ †Age 16 or 17 years. ‡Self-efficacy to quit=belief in ability to quit this time, measured on scale of 1 to 5, 1= very low, 5= very high.

Table 1: Baseline characteristics of participants



Figure 2: Kaplan-Meier analysis of time to relapse

E-cigarette Advertising Expenditures in the U.S., 2011–2012

Annice E. Kim, PhD, Kristin Y. Arnold, MSPH, Olga Makarenko, BA



■ 2011 ■ 2012

Electronic cigarettes: navigating the vapor



* Division of Allergic Diseases, Department of Internal Medicine, Mayo Clinic, Rochester, Minnesota

- [†]Division of Allergy and Immunology, Department of Pediatrics, Mayo Clinic, Rochester, Minnesota
- [‡]Department of Pediatrics, University of Missouri–Kansas City, Faculty, Division of Allergy, Asthma, and Immunology, Children's Mercy Hospital, Kansas City, Missouri

CrossMark





"Smoking Revolution"

A Content Analysis of Electronic Cigarette Retail Websites

Rachel A. Grana, PhD, MPH, Pamela M. Ling, MD, MPH

Claim	Definition	Text example
Health related	Conveys health benefit, reduced harm, and/or no harm to one's health from using the product (e.g., references to "tar" and other compounds in tobacco that are harmful, "healthier," or "breathe easier," pictures of doctors and other health symbols)	"Amerismoke electronic cigarettes are tar free and toxin free. Unlike traditional cigarettes which contain over 3,000 chemicals, with many of them being cancer-causing—Amerismoke is made up of around 3–4 ingredients. All of the ingredients used in Amerismoke are FDA approved and every batch of e Liquid we produce gets thoroughly tested for contaminants and toxins." (www.amerismoke.com)
Cessation related	Conveys the product will help a tobacco smoker to quit smoking (e.g., explicit statements that the products can be used to quit smoking; use the product to cut down, switch completely, and never smoke again)	In the frequently asked questions section: "With all other alternative smoking products that are available on the market, you receive your dose of nicotine but they do not relieve your cravings for the actual process of smoking With Altimoff E Cigarette, quitting smoking is easier and less stressful than with any other product available on the market today." (www.usaecigarette.com)
Ability to smoke anywhere	Refers to ability to use the product anywhere or almost anywhere; often includes lists of places where tobacco smoking is restricted: offices, planes, bars, and restaurants	"SMOKE' ANYWHERE-EVEN AT THE PUB!" (www. liberro.co.uk)
Ability to circumvent smoke-free policies	Indicates that the products may be used to circumvent "smoke-free laws," "smoke-free rules," "clean indoor air regulations," or "smoking bans"	"The dream has become a reality. Imagine, once again, being free to smoke in your favorite nightclub, restaurant, or shopping center. Movie theaters, sporting events, taxis, and even airplanes are all free smoking zones as long as you have Cigarti electronic cigarettes. Virtually everywhere that smoking has been prohibited, Cigarti can go." (www.cigarti.com)

Unproven claims.... with catchy phrases

WHY QUIT? SWITCH TO BLU

blu is the smart choice for smokers wanting a change. Take back your freedom to smoke when and where you want without ash or smell. blu is everything you enjoy about smoking and nothing else. Nobody likes a quitter, so make the switch today.

Visit blucigs.com



No Smell ~ Smoke Anywhere

REAL CIGARETTE!

STES & SMOKES BETTER

No Toxic Chemicals!

to Tar or Yellow Teeth

lo Smelly Clothes

Smoke Anywhere

* New blu Smatt Pack

PREMIUM ELECTRONIC CIGARETTE

18+ only. CALIFORNIA PROPOSITION 65 · Warning: This product contains nicotine, a chemical known to the state of California to cause birth defects or other reproductive harm.

Many Flavors.... Data on safety ?



Compares to: Single Leaf Virginia Tobacco Brands Included strengths: 1 x 18mg.





Included strengths: 1 x 18mg.



Compares to: Multi-Leaf Tobacco Blend Brands Included strengths: 1 x 18mg.

COFFEE ROAST



Compares to: Menthol Blend Tobacco Brands Included strengths: 1 x 18mg.



NOU MUST ALL OF LEGAL SMOKEN AGE TO USE THIS PRODUCT

HOU MUST BE OF LEGAL SMA

Included strengths: 1 x 18mg.



SWEET VANILLA







Included strengths: 1 x 18mg.

EPPERMINT ICE

Included strengths: 1 x 18mg.



Included strengths: 1 x 18mg.

Included strengths: 1 x 18mg.

Comparison of electronic cigarette refill fluid cytotoxicity using embryonic and adult models

Vasundhra Bahl^{a,b,c,1}, Sabrina Lin^{b,c,1}, Nicole Xu^{b,c,1,2}, Barbara Davis^c, Yu-huan Wang^{b,c}, Prue Talbot^{a,b,c,*,1}

^a Environmental Toxicology Graduate Program, University of California, Riverside, CA 92521, United States ^b UCR Stem Cell Center, University of California, Riverside, CA 92521, United States





Dose–response curves showing representative examples of data obtained in the MTT cytotoxicity assay. Absorbance (percentage of the control) from the MTT assays plotted as a function of the refill fluid dose.

(A) Vegetable glycerin (non-cytotoxic),

(B) Bubblegum (non-cytotoxic),

(c) Swiss Dark (moderately cytotoxic),

(D) Domestic(moderately cytotoxic to the stem cells),

(E) Menthol Arctic (moderately cytotoxic the hPF),

(F) Cinnamon Ceylon (highly cytotoxic).

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² Environmental Toxicology Graduate Program, University of California, Riverside, CA 92521, United States ^b UCR Stem Cell Center, University of California, Riverside, CA 92521, United States



Relationship between cytotoxicity and nicotine content .



Relationship between brand and cytotoxicity:

Conclusions from the study

- hESC were generally more sensitive to refill fluids than the other two cell types, and mNSC were generally more sensitive than hPF.
- No company emerged as having all non-cytotoxic or all cytotoxic refill products.
- Samples from Johnson Creek and Red Oak, which were generally cytotoxic to stem cells and non-cytotoxic to lung fibroblasts.
- There was no correlation between cytotoxicity and nicotine concentration for the dose range used.
- Each refill product needs individual evaluation to determine cytotoxicity, preferably using multiple cell types.
- Within a particular flavor, cytotoxicity was highly variable, even when the flavor came from a single manufacturer
- Two different bottles from the same manufacturer with identical Butterscotch labels (#20 and 41) had slightly different chemical composition and significantly different amounts of the two major flavoring chemicals



Use of electronic cigarettes (e-cigarettes) impairs indoor air quality and increases FeNO levels of e-cigarette consumers

Wolfgang Schober^{a,*}, Katalin Szendrei^a, Wolfgang Matzen^a, Helga Osiander-Fuchs^b, Dieter Heitmann^c, Thomas Schettgen^d, Rudolf A. Jörres^e, Hermann Fromme^a

^a Bavarian Health and Food Safety Authority, Department of Chemical Safety and Toxicology, Pfarrstrasse 3, 80538 Munich, Germany
^b Bavarian Health and Food Safety Authority, Department of Cosmetics and Tobacco Products, Veterinärstrasse 2, 85764 Oberschletssheim, Germany

- Despite the recent popularity of e-cigarettes, only limited data is available on their safety for both users and secondhand smokers
- Study reports a comprehensive inner and outer exposure assessment of e-cigarette emissions in terms of





In six vaping sessions nine volunteers consumed e-cigarettes with and without nicotine in a thoroughly ventilated room for two hours.



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- The concentration of putative carcinogenic PAH in indoor air increased by 20% to 147 ng/m3, and aluminum showed a 2.4fold increase.
- PNC ranged from 48,620 to 88,386 particles/cm3(median), with peaks at diameters 24–36 nm.
- FeNO increased in 7 of 9 individuals.
- The nicotine content of the liquids varied and was 1.2-fold higher than claimed by the manufacturer.

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- Data confirm that e-cigarettes are not emission-free and their pollutants could be of health concern for users and secondhand smokers.
- In particular, ultrafine particles formed from supersaturated 1,2propanediol vapor can be deposited in the lung, and aerosolized nicotine seems capable of increasing the release of the inflammatory signaling molecule NO upon inhalation



Variable and potentially fatal amounts of nicotine in e-cigarette nicotine solutions

Jennifer M Cameron,¹ Donelle N Howell,¹ John R White,² David M Andrenyak,^{3,4} Matthew E Layton,¹ John M Roll¹

Table 1 Replicate and mean nicotine concentration analyses for e-cigarette nicotine solutions

			Nicotine (mg/ml) Replicate analyses			
Sample						
ID	Brand*	Expected concentration level	1	2	3	Mean (±S.D.)
А	Vapour liquid (high)	24 mg/ml (marked)	19.8	21.2	16.3	19.1 (±2.52)
В	No brand, hand-labelled liquid (high)	25–36 mg/ml (est.)	12.4	12.1	12.4	12.3 (±0.17)
С	Smart smoke liquid (high)	25–36 mg/ml (est.)	13.2	13.5	12.7	13.1 (±0.40)
D	Smart smoke liquid (med)	10–18 mg/ml (est.)	12.7	11.2	11.9	11.9 (±0.75)
E	Smart smoke liquid (low)	6–14 mg/ml (est.)	8.3	8.6	8.5	8.5 (±0.16)
F	BE112 prefilled cartridge (super high)	25–36 mg/ml (est.)	19.8	20.4	19.5	19.9 (±0.46)
G	Vapour prefilled cartridge (high)	24 mg/ml (marked)	22.4	22.7	21.5	22.2 (±0.62)

Precision and accuracy of the LC-MS analyses for the quality control test solutions were as follows: Low: target concentration=20 ng/ml, measured nicotine mean (SD)=18.5 (\pm 0.95); Medium: target concentration=300 ng/ml, measured nicotine mean=301.4 (\pm 6.05); High: target concentration=1300 ng/ml, measured nicotine mean=1314 (\pm 42.5).

*Nicotine solutions were obtained from local vendors in Spokane, Washington, USA. All labelled brands (Vapour, Smart Smoke, BE112) were also found available for purchase on the internet. Information on country of manufacture was only found for Vapour (USA).

Safe ? Are you sure ?

Nicotine Level Chart

We recommend all new customers start with 18 mg, this is the most comparable to a cigarette, and will perform the best for someone coming off of cigarettes. We do however have other levels of nicotine, which allow you to choose your level of intensity. Use this chart below to decide whats best for you.

Nicotine has a lot to do with how an electronic cigarette performs. This is commonly refereed to as "throat hit." Because of this, dont jump to far up or down the scale, for instance if you are currently on "18", we suggest you try "12" or "24" before any other nicotine strength. This would be one level up or down.



E-cigarette nicotine content by brand, estimated from Cameron et al., Tobacco Control, in press.





Carbonyl Compounds in Electronic Cigarette Vapors – Effects of Nicotine Solvent and Battery Output Voltage

Leon Kosmider PharmD^{1,2}, Andrzej Sobczak PhD^{1,2}, Maciej Fik PharmD², Jakub Knysak PharmD², Marzena Zaciera PhD¹, Jolanta Kurek PhD¹, Maciej Lukasz Goniewicz PharmD, PhD³

¹Department of Chemical Hazards and Genetic Toxicology, Institute of Occupational Medicine and Environmental Health, Sosnowiec, Poland; ²Department of General and Inorganic Chemistry, School of Pharmacy, Medical University of Silesia,



Results: Formaldehyde and acetaldehyde were found in 8 of 13 samples. The amounts of formaldehyde and acetaldehyde in vapors from lower voltage EC were on average 13- and 807-fold lower than in tobacco smoke, respectively. The highest levels of carbonyls were observed in vapors generated from PG-based solutions. Increasing voltage from 3.2 to 4.8 V resulted in 4 to over 200 times increase in formaldehyde, acetaldehyde, and acetone levels. The levels of formaldehyde in vapors from high-voltage device were in the range of levels reported in tobacco smoke.

If they are so safe then why ?

Poison center calls involving e-cigarettes



Electronic cigarettes in the USA: a summary of available toxicology data and suggestions for the future



 Table 1
 Comparison of tobacco-specific nitrosamine levels from nicotine replacement products and tobacco products (ng/g of product wet weight), except for nicotine gum (ng/piece), nicotine patch (ng/patch), e-Cigarette (ng per 16 mg cartridge))

Product Type	Product Brand	NNN	NNK	NAT	NAB	Total
Nicotine replacement product	Nicorette gum (4 mg) ⁴ NicoDerm CQ patch (4 mg) ⁴	2.00 ND	ND 8.00	ND ND	ND ND	2.00 8.00
E-cigarette	Ruyan (16 mg cartridge) ³	3.87	1.46	2.16	0.69	8.18
Smokeless tobacco	Ariva hard snuff ⁴ Stonewall hard snuff ⁴ Revel packets (wintergreen) ⁴ Swedish snus ⁴ Kodiak (wintergreen) ⁴ Copenhagen snuff ⁴ Skoal (long cut straight) ⁴	19 56 640 980 2200 2200 4500	37 43 32 180 410 750 470	120 170 310 790 1800 1800 4100	8 7 17 60 150 120 220	184 276 999 2010 4560 4870 9290
Cigarette	Quest 1 low-nicotine cigarette ⁴ Winston cigarette (full) ⁴ Newport cigarette (full) ⁴ Marlboro cigarette (ultra light) ⁴ Camel cigarette (ultra light) ⁴ Camel cigarette (full) ⁴ Marlboro cigarette (full) ⁴	930 2200 1100 2900 2800 2500 2900	170 580 830 750 770 900 960	310 560 1900 1100 1200 1700 2300	13 25 55 58 55 91 100	1423 3365 3885 4808 4825 5191 6260

NAB: N'-nitrosoanabasine; NAT: N'-nitrosoanatabine; NNK: N'-nitrosonornicotine; NNN: 4-(methylnitrosamino)-1-(3-pyridyl)-1-butanone. ND, not detected.



E-cigarette or Vaping Product Use Associated Lung Injury (EVALI)



Centers for Disease Control and Prevention

Dates of symptom onset and hospital admission for patients with lung injury associated with e-cigarette use, or vaping — United States, March 31–October 19, 2019

Date of Admission (N=1249) 📕 Date of Symptom Onset (N=1139)



Emergency Department (ED) Visits with Electronic Cigarette (E-Cigarette) Product Use as the Reason for the Visit, According to Age Group.



KP Hartnett et al. N Engl J Med 2020;382:766-772.



Comparison of Weekly Counts of ED Visits Related to E-Cigarette Product Use.



Hartnett KP et al. N Engl J Med 2020;382:766-772



ED Visits among Persons 11 to 34 Years of Age Who Received Diagnoses Potentially Related to EVALI, According to Sex.



Hartnett KP et al. N Engl J Med 2020;382:766-772



Vaping related deaths 2019

VAPING DEATHS ACROSS THE US



EVALI – 2019 IL

E-CIGARETTE USE AMONG YOUTH IS NOW EPIDEMIC*

The percent of Illinois teens who first used e-cigs in the past year increases as grade level increases and is increasing from previous years





EVALI

- EVALI may reflect a spectrum of disease processes, rather than a single process.
- Figure 2: CT findings of a patient with acute VAPI



EVALI – Potential Culprils

► THC

 The majority of patients with EVALI report use of products containing THC (75 to 80 percent)

THC (or its metabolites) was identified in 94 percent of patients with EVALI but was undetectable in BAL from healthy individuals.

Vitamin E acetate

A synthetic form of vitamin E, was initially identified in BAL samples from 29 patients with EVALI from 10 different states [19].

Nicotine – Approximately 13 to 58 percent of patients with EVALI report having used nicotine-containing products with or without THC in the 90 days preceding symptom

Other – Other oils thought to be potential culprits (eg, CBD or other plant oils, medium chain triglycerides, petroleum distillates, terpenes) have not been consistently found in products smoked by patients or in BAL fluid from patients with EVALI

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Vitamin E Acetate in Bronchoalveolar-Lavage Fluid Associated with EVALI

SPECIAL REPORT

Syndromic Surveillance for E-Cigarette, or Vaping, Product Use–Associated Lung Injury

Kathleen P. Hartnett, Ph.D., Aaron Kite-Powell, M.S., Megan T. Patel, M.P.H.,



Cornering the Suspects in Vaping-Associated EVALI

Terry Gordon, Ph.D., and Jonathan Fine, M.D.

Frequency of Detection of Priority Toxicants in EVALI Case Patients and in Healthy Comparators.

Table 3. Frequency of Detection of Priority Toxicants in EVALI Case Patients and in Healthy Comparators.*						
Toxicant	EVALI Case Patients (N=51)	Healthy Comparators				
		Nonusers (N=52)	E-Cigarette Users (N=18)	Cigarette Smokers (N=29)	All Comparators (N=99)	
		number/total number (percent)				
Vitamin E acetate	48/51 (94)	0/52	0/18	0/29	0/99	
Medium-chain triglyc- eride oil	0/49	0/34	0/11	0/18	0/63	
Coconut oil	1/48 (2)	0/34	0/11	0/18	0/63	
Plant oil	0/49	0/34	0/11	0/17	0/62	
Squalane	0/38	0/52	0/17	0/29	0/98	
Squalene	0/38	0/52	0/17	0/29	0/98	
α -Pinene	0/39	0/52	0/17	0/28	0/97	
eta-Pinene	0/39	0/52	0/17	0/28	0/97	
3-Carene	0/39	0/52	0/17	0/28	0/97	
Limonene	1/39 (3)	0/52	0/17	0/28	0/97	
Petroleum distillates	0/12	0/52	0/17	0/29	0/98	

* The listed toxicants were detected in bronchoalveolar-lavage fluid obtained from 51 patients with EVALI in 16 states from August through December 2019 and in 99 healthy comparators.

Blount BC et al. N Engl J Med 2020;382:697-705



E-CIGARETTES AND PREGNANCY

E-CIGARETTE USE DURING PREGNANCY IS UNSAFE

 E-cigarettes contain nicotine

MMWR

 Nicotine can damage a baby's developing brain & lungs WOMEN REPORTED USING E-CIGARETTES

7.0% at any point around the time of pregnancy¹

> 1.4% during the last 3 months of pregnancy

TAKE ACTION

Know the risks

 Talk to your healthcare provider about quitting

Be tobacco-free

¹Questions asked about use in the 3 months before pregnancy, the last 3 months of pregnancy, or 2–6 months after delivery. Data from the 2015 Oklahoma and Texas Pregnancy Fisk Assessment Monitoring System (PRAMS). Kapaya et. al. MMWR 2019. bit.ly/CDCVA. 23 WWW.CDC.GOV

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Who bans e-cigarettes?

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So it time to QUIT !!

